

Acquired Immunodeficiency Syndrome (AIDS)

Acquired immunodeficiency syndrome (AIDS), with its associated morbidity and mortality, results from infection with the human immunodeficiency virus (HIV). Before the introduction of highly active antiretroviral therapy, the average incubation period from acquisition of HIV to the development of AIDS was estimated to be 8–10 years (1). Overall declines in AIDS incidence and deaths in 1996 and 1997 provide evidence of the widespread beneficial effects of new treatment regimens. Rather than an inevitable progression of HIV infection, a diagnosis of AIDS now increasingly represents late diagnosis, poor access to care, or treatment failure (2).

■ In 1996–98 AIDS rates increased with age among all racial and ethnic groups. Adolescents in some minority racial and ethnic groups are disproportionately affected by HIV and AIDS. In 1996–98 non-Hispanic black and Hispanic adolescents in every age group had higher rates of AIDS than non-Hispanic white adolescents. AIDS rates among American Indian or Alaska Native and Asian or Pacific Islander adolescents remain very low.

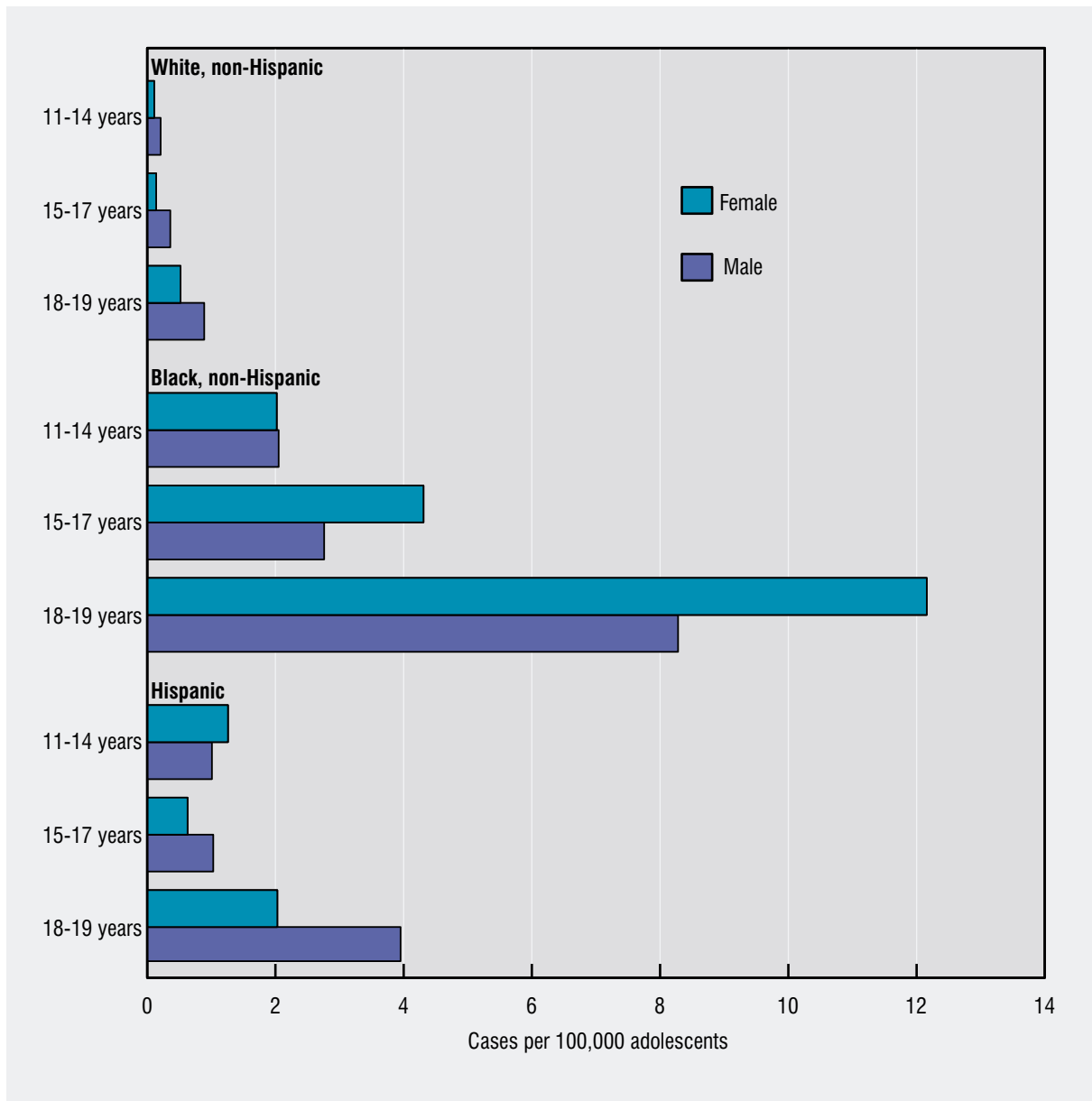
■ Although the overall prevalence of AIDS in adolescents is relatively low, the rate of HIV infection is higher. It is likely that most young adults who develop AIDS acquired HIV infection during their adolescent years. Sexual activity and drug use activities among adolescents place them at high risk for HIV transmission. Sexually transmitted diseases common among adolescents, chlamydia and gonorrhea, are believed to facilitate HIV transmission (1).

■ HIV prevention strategies include promoting knowledge of risk behaviors that increase the risk of HIV infection, increasing awareness of methods to reduce risk, and improving access to effective care and treatment programs to improve health and survival among persons who are already infected. Healthy People 2010 identified a reduction in the number of cases of HIV infection among adolescents as a critical adolescent objective (3).

References

1. Boyers DB, Kegeles SM. AIDS risk and prevention among adolescents. *Soc Sci Med* 33(1):11–23. 1991.
2. Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report. 9(1). 1997.
3. U.S. Department of Health and Human Services. Healthy People 2010 (Conference Edition, in Two Volumes). Washington: January 2000.

Figure 24. Acquired immunodeficiency syndrome (AIDS) rates reported for adolescents 11–19 years of age, by age, sex, race, and Hispanic origin: United States, average annual 1996–98



NOTES: States not reporting race/ethnicity and age for the majority of cases were excluded from the analysis. See Technical Notes for further discussion. See Data Table for data points graphed.

SOURCE: Centers for Disease Control and Prevention, National Center for STD, HIV, and TB Prevention. See related *Health, United States, 2000*, tables 53 and 54.